

Status: Finalized

## I. Center Identification

Organization Name: MICHIANA SURGERY CENTER LLC

Street Address: 3212 Hickory Road

City: mishawaka

County: St. Joseph

Administrator Name: Danielle Kertai

Administrator Email: danipainmgmnt@gmail.com

ASC Web Address: michianasurgery.com

Fiscal Year: 2016

Accredited: • Yes • No

Name of Accrediting Body: Joint Commission

Deemed Status: • Yes • No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	

## III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2638	2638
B. Ten Most Frequent Surgical Procedures Perfo	ormed	
CPT Code		<b>Total Procedures</b>
62311		962
64483		645
64493		247
64490		224
62310		174
20610		96
64635		50

64633	38
27096	37
64405	30

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	0
a surgical encounter.	